

MRI Service Utilization List, November 1, 2023

MOBILE ROUTES #92 - #109

Reporting Period July 1, 2022 through June 30, 2023

Service ID BHS ID	Service Name	No. of Clinical Units <u>1</u>	No. of Visits	No. of AP <u>2</u>	Footnotes	No. of AAP
000378	Mobile #92	1	3,483	4,674		0
63C861	Clear Imaging		7	10		
82C024	Instant Imaging, LLC		3,476	4,664		
010048	Mobile #94	1	1,019	1,624		0
63C044	Ascend Imaging		120	181		
25C055	Complete Health Systems, Inc.		43	56		
63C061	Maxim MRI Services, LLC		604	1,101		
580030	Promedica Monroe Regional Hospital		252	286		
010074	Mobile #96	1	3,318	4,859		0
130031	Bronson Battle Creek Hospital		555	847		
390020	Bronson Methodist Hospital		558	919		
70C012	Holland Medical Office Building		886	1,181		
252612	Regional Medical Imaging		532	727		
230022	Sparrow Eaton Hospital		770	1,148		
340021	Sparrow Ionia Hospital		5	14		
750010	Sturgis Hospital		12	23		
010285	Mobile #105	1	884	1,475		0
030032	Allegan General Hospital		106	215		
130031	Bronson Battle Creek Hospital		154	231		
800020	Bronson South Haven Hospital		19	23		
490030	Mackinac Straits Hosp and Hlth Ctr		202	405		
190011	Sparrow Clinton Hospital		118	179		
230022	Sparrow Eaton Hospital		274	403		
750010	Sturgis Hospital		11	19		
010299	Mobile #106	1	4,762	5,990		0
63C819	Clarkston Imaging Center		681	1,120		
63C858	Elite MRI of Michigan-Auburn		1,910	2,128		
63C762	Elite MRI of Michigan-Waterford		833	879		
50C677	McLaren Macomb - Shelby		450	697		
63C892	Michigan Resonance Imaging/Auburn		888	1,166		
010385	Mobile #109	1	2,919	4,732		0
030032	Allegan General Hospital		221	464		
800041	Bronson Lakeview Hospital		8	18		
390020	Bronson Methodist Hospital		1,213	1,980		
800020	Bronson South Haven Hospital		851	1,326		
110040	Corewell Health Watervliet Hospital		584	885		
41C077	Michigan Radiology Institute, PLLC		42	59		

**MRI Service Utilization List
November 1, 2023 Footnotes**

AP – Adjusted Procedures

AAP – Available Adjusted Procedures

1 - Includes existing, approved, and applications for additional magnets that have been deemed submitted or under appeal.

2 - Adjustments are defined in Section 16 of the Certificate of Need Review Standards for Magnetic Resonance Imaging.

3 - New MRI service, not a full year of data available for this reporting period.

4 - This MRI site submitted an application for a fixed MRI unit/service under Section 3(2) of the currently approved MRI Standards. Section 18(1)(a)(ii) states “the MRI adjusted procedures, from the host site routes utilized to meet the requirements of Section 3(2)(c), shall be excluded beginning at the time the application is submitted and for three years from the date the fixed MRI unit becomes operational.”

5 - This fixed MRI Service has applied for expansion under Section 5(1)(b). Section 18(1)(a)(iii) states that “the MRI adjusted procedures utilized to meet the requirements of Section 5(1) shall be reduced by 8,000 and shall be excluded beginning at the time of the application is submitted and for three years from the date the fixed MRI unit becomes operational.”

6 - Fixed MRI services located in rural or micropolitan statistical areas are subject to the provisions of Section 16(2)(e) when proposing a subsequent fixed MRI unit (second, third, etc.) according to Section 5 (1).

7 - This MRI Service is a dedicated pediatric magnet that was approved under Section 8. Section 18(1)(a) (i) states “dedicated pediatric MRI approved pursuant to Section 8 shall be excluded.”

8 - The magnet at this site was relocated from an original site with footnote no. 10 in accordance with Section 4(6). For volume purposes, however, these sites will be combined as one service for a period of 3 years from the start of clinical operation of the relocated magnet. Available adjusted procedures for either site will be reported under the original site.

9 - This MRI service does not have a full year of data due to missing data, invalid data, or the service not operating during a quarter(s).

10 - A fixed magnet from this MRI Service has been relocated in accordance with Section 4(6). The relocated magnet will be shown as a new MRI Service with footnote no. 8. All data from the relocated magnet will be reported at the new service site. For volume purposes, however, these sites will be combined as one service for a period of 3 years from the start of clinical operation of the relocated magnet. Available adjusted procedures for either site will be reported under the original site.

11 - This MRI Service is an Intra-operative MRI that was approved under Section 9. Section 9(8) states “The applicant shall not utilize the procedures performed on the IMRI unit to demonstrate need or to satisfy MRI CON review standards requirements.”

Note: The data represents all accepted data available to the department for the July 1, 2022 through June 30, 2023, reporting period. The data does not include:

- a. Data that was not submitted on a timely basis.
- b. Data that has not completed system edits.
- c. The subtraction of doctor commitments for Certificate of Need applications for Magnetic Resonance Imaging services that were filed on or after the above report preparation date.

Source: Certificate of Need Review Standards for MRI Services (Effective January 26, 2023)
Certificate of Need Section, Michigan Department of Health and Human Services